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Office paperness	U.S. Pater	Docket Number (0	Optional)
ETITION FOR EXTENSION OF TIME U			
	III to Application of	stopher B. McK	Filed December 21, 200
	Application Number 10/0	WEDACE HOLE	
	For ILLUMINATED BE		51110 02 110
	Art Unit 1761	Examiner	in the above identified
his is a request under the provisions of 37 C	FR 1.136(a) to extend the pend	od for filling a repr	y in the above resident
pplication. he requested extension and appropriate no	n-small-entity fee are as follows	(check time period	od desired):
he requested extension and appropriate the open on the requested extension and appropriate the requested extension and appropr)		\$
Two months (37 CFR 1.17(a)(2			\$
- -	חבי	CEIVED	\$
Three months (37 CFR 1.17(a)	UCI	1 6 2003	\$_1480.00
Four months (37 CFR 1.17(a)(`מרדומד	OF PETITIONS	\$
Five months (37 CFR 1.17(a)(on above is reduced by one-
Applicant claims small entity status. S half, and the resulting fee is: \$740.0	<u></u> .	lee amount one.	
☐ A check in the amount of the fee in	s enclosed.		
Bayment by credit card. Form PT	O-2038 is attached.	liention to	a Denosit Account.
Payment by credit card. Form PT	thorized to charge fees in th	s application to	a Deposit Account.
Payment by credit card. Form PTG The Director has already been au The Director is hereby authorized to Deposit Account Number 11-1	thorized to charge fees in th to charge any fees which m 540	s application to	a Deposit Account. or credit any overpaymen
Payment by credit card. Form PTC The Director has already been au The Director is hereby authorized	thorized to charge fees in th to charge any fees which m 540	s application to	a Deposit Account. or credit any overpaymen
☐ Payment by credit card. Form PTG☐ ☐ The Director has already been au ☐ The Director is hereby authorized to Deposit Account Number 11-1 ☐ I have enclosed a duplicate copy ☐ I am the ☐ applicant/inventor	thorized to charge fees in the to charge any fees which medical medica	ay be required,	a Deposit Account. or credit any overpaymen
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Payment by credit card. Form PTC The Director has already been au The Director is hereby authorized to Deposit Account Number 11-1 I have enclosed a duplicate copy I am the applicant/inventor assignee of reconstatement un attorney or agen	thorized to charge fees in the to charge any fees which mediate to charge any fees which mediate this sheet. The third sheet interest. Seed the der 37 CFR 3.73(b) is enclosed to frecord. Registration Number if acting under 37 CFR 1.34(a). The third sheet is credit for the charge public Credit for the charge and the charge fees in the cha	37 CFR 3.71. sed (Form PTO) ber 39,952	or credit any overpayment/SB/96).
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forms are submitted. Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minuties to complete, USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minuties to complete, USPTO to the USPTO. Time will vary depending upon the individual case. Any comments including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, USS Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, USS Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, USS Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, USS Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. USS Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. USS Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. USS Patent on the USPTO OF Information Officer. USS Patent on the USPTO OF Information Officer. USS Patent on the Information Officer. USS Patent OF Information Officer. USS Paten